PTO/SB/21 (04-04)

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TRANSMITTAL **FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

| Application Number | 10/643,716 | |
|------------------------|-------------------------|--|
| Filing Date | 08/19/2003 | |
| First Named Inventor | Norihisa Sasano, et al. | |
| Art Unit | 3618 | |
| Examiner Name | Brian Swenson | |
| Attorney Docket Number | 4041K-000147 | |

| ENCLOSURES (check all that apply) | | | | | | | | | |
|--|-----------------|--|---|--|--|--|--|--|--|
| Fee Transmittal F | orm | ☐ Drawing(s) | Ü | After Allowance Communication to Technology Center (TC) | | | | | |
| Fee Attached | | Licensing-r | elated Papers | Appeal Communication to Board of Appeals and Interferences | | | | | |
| Amendment / Rep | ply | Petition | | Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) | | | | | |
| After Final | | | Convert to a Application | Proprietary Information | | | | | |
| Affidavits/dec | laration(s) | | ttorney, Revocation Correspondence Address | Status Letter | | | | | |
| Extension of Time | Request | Terminal D | isclaimer | Other Enclosure(s) (please identify below): | | | | | |
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| Express Abandon | ment Request | CD, Numbe | er of CD(s) | | | | | | |
| ☐ Information Disclo | sure Statement | | | | | | | | |
| Certified Copy of Document(s) | Priority | Remarks The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. | | | | | | | |
| Response to Miss Incomplete Applic | | | | | | | | | |
| Response to I | | * | | | | | | | |
| Parts under 3 1.52 or 1.53 | 7 CFR | | | | | | | | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | | | | | | | |
| Firm or Harness, Dickey & Individual name | | Attorney Name | | Reg. No. 34,007 | | | | | |
| Signature | Mh | | | | | | | | |
| Date | January 2, 2007 | | DE TRANSMISSION/MAIL | | | | | | |

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| Effective on 12/0 | | Complete if Known | | | |
|----------------------------------|--------------------------------|-----------------------|---|--|--|
| 31 | | Application Number | 10/643,716 | | |
| 🕅 ಶ್ರ) FEE TRANS | DIVITIAL | Filing Date | 08/19/2003 | | |
| for FY 2 | 2006 | First Named Inventor | Norihisa Sasano, et al. | | |
| Applicant claims small entity st | atus. See 37 CFR 1.27 | Examiner Name | Brian Swenson | | |
| | Μ <u>.</u> | Art Unit | 3618 | | |
| TOTAL AMOUNT OF PAYMENT | (\$) 1020 | Attorney Docket No. | 4041K-000147 | | |
| METHOD OF PAYMENT (check | all that apply) | | | | |
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| | CFR 1.16 ar | | | | | | | | |
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| FEE CALCULATION | | | | | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | | | |
| | FILING F | | | SEAR | CH FEES | EXAMIN | ATION FEES | | |
| | | Small Ent | ity | | Small Entity | | Small Entity | | |
| Application Type | <u>Fee (\$)</u> | <u>Fee(\$)</u> | | Fee(\$ |) <u>Fee(\$)</u> | <u>Fee(\$)</u> | <u>Fee(\$)</u> | Fees Paid (\$) | |
| Utility | 300 | 150 | | 500 | 250 | 200 | 100 | | |
| Design | 200 | 100 | | 100 | 50 | 130 | 65 | | |
| Plant | 200 | 100 | | 300 | 150 | 160 | 80 | | |
| Reissue | 300 | 150 | | 500 | 250 | 600 | 300 | | |
| Provisional | 200 | 100 | | 0 | 0 | 0 | 0 | | |
| 2. EXCESS CLAIM FE | ES | | | | | | | Small Entity | |
| Fee Description Fee (\$) Fee (\$) | | | | | | | | | |
| Each claim over 20 (including Reissues) 50 25 | | | | | | | | | |
| Each independent clain | | luding Reis | sues) | | | | 200 | 100 | |
| Multiple dependent cla | | 1 | - (A) | | · · · · · · · | | 360 | 180 | |
| | Total Claims | | | | | | | | |
| <u>7</u> -20 or HP | _ | х | <u>55</u> | = | <u>0</u> | | <u>Fee (\$)</u> | Fee Paid (\$) | |
| HP = highest number of | | | | | | | | | |
| Indep. Claims | Extra C | | Fee(\$) | | Fee Paid (\$) | | | | |
| <u>1</u> - 3 or HP= | _ | X | <u>200</u> | = | <u>0</u> | | | | |
| HP = highest number of | • | laims paid for | r, if greater th | han 3. | | | | | |
| 3. APPLICATION SIZE | | 1.00.1 | | | | | | | |
| If the specification and d | | | | | | | | 50 | |
| | | | | | e is \$250 (\$125 for sn | nan entity) for | each additional | 30 | |
| sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) | | | | | | | | | |
| • | = 0 | / 50 = | 0 | | up to a whole num | | | = 0 | |
| 4. OTHER FEE(S) | | | _ | • | - | • | | Fees Paid (\$) | |

| | Total Sheets | Extra Sheets Number of each additional 50 or fraction thereof Fee (| | | Fee (\$) | Fee Paid (\$) | |
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| | • | = 0 | / 50 = | <u>0</u> | (round up to a whole number) x | | = <u>0</u> |
| 4. | OTHER FEE(S) | | | | | | Fees Paid (\$) |
| | Non-English Specification, \$130 fee (no small entity discount) | | | | | | |
| | Other (e.g., late filing surcharge): Three Month Extension of Time | | | | | <u>1020</u> | |
| | | | | | | | |

| SUBMITTED BY | 1111 | • | | | |
|-------------------|-----------------|--------------------------------------|--------|-----------|-----------------|
| Signature | Molal | Registration No. (Attorney/Agent) | 34,007 | Telephone | (248) 641-1600 |
| Name (Print/Type) | Michael Schmidt | | | Date | January 2, 2007 |

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